Case 16-81307 Doc 1 Filed 05/27/16 Entered 05/27/16 14:32:30 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Your	Identify Yourself								
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):							
1.	Your full name									
	Write the name that your government-is picture identification example, your drive license or passport Bring your picture identification to you meeting with the true.	First name First name First name Strickson First name First name First name First name First name First name	First name Middle name Last name and Suffix (Sr., Jr., II, III)							
2.	All other names y used in the last 8 Include your marrie maiden names.	years								
3.	Only the last 4 dig your Social Secur number or federa Individual Taxpay Identification num (ITIN)	ity xxx-xx-1563 er								

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Case number (if known)

Debtor 1 Bennie S Erickson

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2830-18th Street Rockford, IL 61109 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Winnebago County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Bennie S Erickson

⊃ar	t 2: Tell the Court About	Your B	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see Notice Required by of page 1 and check the appropriate	by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy briate box.	
	choosing to file under	■ C	hapter 7				
		□с	hapter 11				
		□с	hapter 12				
		□с	hapter 13				
3.	How you will pay the fee		about how yo	ou may pay. Ty attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for more defurself, you may pay with cash, cashier's check, or molf, your attorney may pay with a credit card or check	ney
					stallments. If you choose this option ts (Official Form 103A).	n, sign and attach the Application for Individuals to Pa	ay
			but is not req applies to yo	uired to, waive ur family size a	your fee, and may do so only if yound you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judge m ir income is less than 150% of the official poverty line installments). If you choose this option, you must fill al Form 103B) and file it with your petition.	that
			те Аррисан	on to Have the	onapier i i iling i ee walved (Ollic	ari omi 103B) and me it with your pention.	
).	Have you filed for bankruptcy within the	■ No					
	last 8 years?	□ Ye			140		
			District		When	Case number	
			District		When When	Case number Case number	
			District		when	Case number	
10.	Are any bankruptcy	■ No	D				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	9 \$.				
			Debtor	-		Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No	Go to I	ine 12.			
		□ Ye	es. Has yo	our landlord obt	ained an eviction judgment against	you and do you want to stay in your residence?	
				No. Go to line	12.		
				Yes. Fill out Ir bankruptcy pe		ludgment Against You (Form 101A) and file it with this	5

Debtor 1	Bennie S Erickson	Document	Page 4 of 53 Case number (if known)	

art	3: Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busing	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	e & ZIP Code				
	it to this petition.		Chec	k the appropriate box	to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
If you are filing under Chapter 11, the court must know whether you are a small business debtor. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recommendation operations, cash-flow statement, and federal income tax return or if any of these documents debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recommendation in 11 U.S.C. 1116(1)(B).				small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	No.	I am ı	not filing under Chapt	er 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptce Code.				
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.			
art	4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	■ No. ☐ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number Circus City Class 8 7 to Oads			
					Number, Street, City, State & Zip Code			

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Debtor 1 Bennie S Erickson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-81307 Doc 1 Filed 05/27/16 Entered 05/27/16 14:32:30 Desc Main Document Page 6 of 53 Case number (if known) Debtor 1 **Bennie S Erickson** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Bennie S Erickson Signature of Debtor 2 Bennie S Erickson

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on May 27, 2016

MM / DD / YYYY

Debtor 1 Bennie S Erickson Document Page 7 of 53 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Dennis L	. Leahy	Date	May 27, 2016
Signature of A	Attorney for Debtor		MM / DD / YYYY
Dennis L Le	eahy		
Dennis L Le	eahy		
One Court F	Place Suite 203		
Rockford, IL	L 61101		
Number, Street, Ci	ity, State & ZIP Code		
Contact phone	815 964-9600	Email address	attyleahy@yahoo.com
1599046			
Bar number & State	e		_

		Docume	ent Page 8 of 5	3				
Fill in this information to identify your case:								
Debtor 1	Bennie S Erickso	n						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number					Check if this is an			
					amended filing			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	51,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,235.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	66,235.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	72,429.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	51,128.00
	Your total liabilities	\$	123,557.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,302.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,158.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Case number (if known) Debtor 1 Bennie S Erickson

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

1,759.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in th	his inforn	nation to identify	your case and th							
Debtor 1	1	Bennie S Eri		e Name		Last Name				
Debtor 2 (Spouse, if		First Name		e Name		Last Name				
United S	States Bai	nkruptcy Court for	the: NORTHER	N DISTI	RICT OF ILLIN	NOIS				
Case nu	umber _					-			Check if this is an amended filing	
Schon each ca hink it fit nformation	edule ategory, se ts best. Be on. If more	e as complete and a e space is needed, a	coperty escribe items. List accurate as possible	le. If two	married people	n asset fits in more than one are filing together, both are a top of any additional pages	equally responsibl	e for supply	ing correct	
	every ques		uilding Land or Ot	har Baal	Estato Vou Ou	n or Have an Interest In				
■ Yes		s the property?		What		? Check all that apply				
2830-18th St Street address, if available, or other description			Duplex or multi-unit building the amount of					duct secured claims or exemptions. Put it of any secured claims on <i>Schedule D:</i> Who Have Claims Secured by Property.		
	ockford	IL	61108-0000		Land	or mobile home	Current value of entire property?	po	urrent value of the ortion you own?	
City	/	State	ZIP Code	U Who	Investment pro Timeshare Other has an interest Debtor 1 only	in the property? Check one		ure of your ple, tenancy	\$51,000.00 ownership interest y by the entireties, or	
Wi	innebag	0			Debtor 2 only					
Cou	unty			□ ■		the debtors and another	(see instruction		nity property	
					erty identification	ou wish to add about this iter on number:	n, such as local			
2. Add	d the dolla	ar value of the po	rtion you own fo	or all of y	our entries f	rom Part 1, including any	entries for		A54 000 00	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here.......>>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$51,000.00

		Case 16	-81307	Doc 1		Entered 05/27	7/16 14:32:30	Desc Main
Debt	or 1	Bennie S E	rickson		Document	Page 11 of 53	ase number (if known)	
3. C a	ırs, var	ns, trucks, tra	ctors, spo	rt utility vel	hicles, motorcycles			
	No							
	Yes							
							B	
3.1	Make	1			Who has an interest in th	e property? Check one	the amount of any	red claims or exemptions. Put secured claims on <i>Schedule D:</i>
	Mode Year:		•		■ Debtor 1 only		Creditors Who Hav	e Claims Secured by Property.
		oximate mileage:		55,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 of	only	Current value of t entire property?	he Current value of the portion you own?
		information:			☐ At least one of the debte	•		, , , , , , , , , , , , , , , , , , , ,
		ect to secur nbers Alliand			Check if this is comme (see instructions)	unity property	\$11,000	\$11,000.00
.pa	ages you	ou have attac	hed for Pa	rt 2. Write t	n for all of your entries fr that number here ems terest in any of the follow			\$11,000.00 Current value of the portion you own?
E	xample No	old goods and es: Major applia Describe	l furnishin ances, furn	gs iture, linens,	, china, kitchenware			Do not deduct secured claims or exemptions.
	103.	Describe	house	hold good	ds and furnishings			\$1,000.00
E	No	es: Televisions	ell phones,	cameras, m	eo, stereo, and digital equip nedia players, games sell phone	oment; computers, printe	ers, scanners; music co	ollections; electronic devices
E	xample No			; paintings, _l norabilia, col		oks, pictures, or other ar	t objects; stamp, coin,	or baseball card collections;
E	xample No	ent for sports es: Sports, pho musical ins Describe	tographic,		nd other hobby equipment;	bicycles, pool tables, go	lf clubs, skis; canoes a	nd kayaks; carpentry tools;
	irearm Exampi No		es, shotgur	ns, ammunit	tion, and related equipmen	t		

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Debtor 1	Bennie S Eric	kson	Document	Page 12 of 53 Case number (if known)	
☐ Yes.	Describe				
□ No		hes, furs, leather coat	s, designer wear, shoes,	accessories	
		Debtor's clothing			\$300.00
■ No □ Yes.			engagement rings, wed	ding rings, heirloom jewelry, watches, gems, ς	gold, silver
■ No □ Yes	Describe				
14. Any ot ■ No		-	u did not already list, iı	ncluding any health aids you did not list	
			om Part 3, including a	ny entries for pages you have attached	\$1,800.00
Part 4: De	scribe Your Financi	al Assets			
Do you ov	wn or have any leg	gal or equitable inter	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No			our home, in a safe depo	osit box, and on hand when you file your petiti	on
Exam _l			al accounts; certificates counts with the same ins	of deposit; shares in credit unions, brokerage l titution, list each.	nouses, and other similar
□ No ■ Yes			Institution n	ame:	
		17.1. checking	Chase		\$400.00
		17.2. savings	Chase		\$35.00
<i>Exam</i> µ ■ No		r publicly traded stoc nvestment accounts w	ith brokerage firms, mor	ney market accounts	
19. Non-po				orporated businesses, including an interes	t in an LLC, partnership, and
■ No □ Yes.	Give specific infor	mation about them Name of entity:		% of ownership:	

Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Document Debtor 1 **Bennie S Erickson** 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information...

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Debtor 1	Bennie S Erickso	on	Case number (if known)	
	sts in insurance polic aples: Health, disability,		SA); credit, homeowner's, or renter's insuran	се
		company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	-	Life insurance policy with death ber only	nefit	\$0.00
	_	\$3,000 Life insurance policy with Jo Hancock	hnDebtor's daughter	\$500.00
	-	\$10,000 life insurance policy with Jo Hancock	Debtor's daughter	\$1,000.00
	-	\$3,000 life insurance policy with Joh Hancock	nn Debtor's daughter	\$500.00
If you some No Yes 33. Claim Exam No Yes 34. Other No Yes 35. Any fi	are the beneficiary of a one has died. Give specific information in the second	tion s, whether or not you have filed a lawsuit yment disputes, insurance claims, or rights the second control of the second cont	urance policy, or are currently entitled to rece or made a demand for payment	
		Deceased husband's VA mo	onthly death benefit - \$1,254/mo.	Unknowr
		Deceased husband's month	nly retirement - \$505/ mo.	Unknowr
for F	Part 4. Write that numb	of your entries from Part 4, including any oer here		\$2,435.00
37. Do you N o. G	<u> </u>	r equitable interest in any business-related pro	•	
		ommercial Fishing-Related Property You Own st in farmland, list it in Part 1.	or Have an Interest In.	

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

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Case number (if known) Document Debtor 1 **Bennie S Erickson** ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$51,000.00 Part 2: Total vehicles, line 5 \$11,000.00 Part 3: Total personal and household items, line 15 \$1,800.00 Part 4: Total financial assets, line 36 58. \$2,435.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$15,235.00 Copy personal property total \$15,235.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$66,235.00

Official Form 106A/B Schedule A/B: Property page 6

		I A A A HIR.		
Fill in this infor	mation to identify your	case:		
Debtor 1	Bennie S Erickso	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$51,000.00		\$15,000.00	735 ILCS 5/12-901
		100% of fair market value, up to any applicable statutory limit	
\$11,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to	
	\$11,000.00 \$1,000.00	\$11,000.00 \$11,000.00 \$50.00 \$10.00 \$	Copy the value from Schedule A/B \$51,000.00 \$15,000.00 100% of fair market value, up to any applicable statutory limit \$11,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$2,400.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$2,000.00 \$1,000.00 \$1,000.00 \$2,000.00 \$1,000.00 \$2,000.00 \$300.00 \$300.00

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btor 1 Bennie S Erickson			Case number (if known)		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim ck only one box for each exemption.	Specific laws that allow exemption	
	Schedule A/B	0110	on only one box for odon exemption.		
checking: Chase Line from Schedule A/B: 17.1	\$400.00		\$400.00	735 ILCS 5/12-1001(b)	
			100% of fair market value, up to any applicable statutory limit		
savings: Chase Line from Schedule A/B: 17.2	\$35.00		\$35.00	735 ILCS 5/12-1001(b)	
			100% of fair market value, up to any applicable statutory limit		
\$3,000 Life insurance policy with John Hancock	\$500.00		\$500.00	215 ILCS 5/238	
Beneficiary: Debtor's daughter Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit		
\$10,000 life insurance policy with John Hancock	\$1,000.00		\$1,000.00	215 ILCS 5/238	
Beneficiary: Debtor's daughter ine from Schedule A/B: 31.3			100% of fair market value, up to any applicable statutory limit		
\$3,000 life insurance policy with John Hancock	\$500.00		\$500.00	215 ILCS 5/238	
Beneficiary: Debtor's daughter ine from Schedule A/B: 31.4			100% of fair market value, up to any applicable statutory limit		
Deceased husband's VA monthly death benefit - \$1,254/mo.	Unknown			735 ILCS 5/12-1001(g)(2)	
Line from Schedule A/B: 35.1		•	100% of fair market value, up to any applicable statutory limit		
Deceased husband's monthly retirement - \$505/ mo.	Unknown			735 ILCS 5/12-704	
ine from Schedule A/B: 35.2			100% of fair market value, up to any applicable statutory limit		
Are you claiming a homestead exemption Subject to adjustment on 4/01/19 and every			lad on an after the date of adjustmen		
Subject to adjustment on 4/01/19 and every	o years anei mai lui ca	ioco III	ed on or alter the date of adjustmen	n.,	
☐ Yes. Did you acquire the property cove☐ No	red by the exemption wi	thin 1	215 days before you filed this case	?	
 □ Yes					

		Document	Page 18	of 53		
Fill in this informat	tion to identify you	r case:				
Debtor 1	Bennie S Ericks	on				
-	First Name	Middle Name	Last Name		-	
Debtor 2					_	
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankr	ruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case number					□ Chook	if this is an
(ii kilowii)					_	ed filing
					amene	ca ming
Official Form	106D					
		Who Have Claims	Secured	hy Propert	V	12/15
Scriedule D	. Creditors	Wild Have Claims	<u> Secureu</u>	by Fropert	<u>y</u>	12/15
		f two married people are filing togeth				
is needed, copy the Ai number (if known).	dditional Page, fill it d	out, number the entries, and attach it	to this form. On	the top of any additio	nal pages, write your nai	ne and case
1. Do any creditors ha	ve claims secured by	vour property?				
· ·	•	nis form to the court with your other	schedules You	u have nothing else t	to report on this form	
_			Soricadics. To	a nave nothing clock	to report our tillo form.	
Yes. Fill in al	I of the information I	pelow.				
Part 1: List All S	Secured Claims			O-1 A	O-1 D	0-1
		nore than one secured claim, list the cre		Column A	Column B	Column C
		a particular claim, list the other creditors cal order according to the creditor's name		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
		•		value of collateral.	claim	If any
2.1 Chase Mtg Creditor's Name		Describe the property that secures t		\$63,000.00	\$51,000.00	\$12,000.00
Creditor's Name		mortgage against residence				
P.O. Box 24	696	As of the date you file, the claim is:	Check all that			
Columbus,		apply. Contingent				
Number, Street, Cit	ty, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as i	mortgage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this clain	n relates to a	Other (including a right to offset)				
community debt						
	Opened					
	9/01/09					
Data daht was insure	Last Active	Look 4 digito of account numb	_{oer} 9370			
Date debt was incurre	ed 4/01/16	Last 4 digits of account numl	Jei			
Marahara Al	llianaa Cradit					
2.2 Members Ai	liance Credit	Describe the property that secures t	he claim:	\$9,429.00	\$0.00	\$9,429.00
Creditor's Name		2011 Buick LaSerne	-	, , , , , , , , , , , , , , , , , , , 		
		2011 Buion Eucomo				
		A distribution of the state of				
2550 S Alpir		As of the date you file, the claim is: apply.	Check all that			
Rockford, IL	_ 61108	☐ Contingent				
Number, Street, Cit	ty, State & Zip Code	Unliquidated				
M/ha asses ()	3 Ob b	Disputed				
Who owes the debt	r Uneck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as r	mortgage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Debto		☐ Statutory lien (such as tax lien, med ☐ Judgment lien from a lawsuit	cnanic's lien)			
At least one of the	นธมเบเร สแน สกอเกยใ	Judgment lien from a lawsuit				

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Debtor 1 Bennie S	Erickson		Case number (if know)	
First Name	Middle Na	ame Last Name	_	
☐ Check if this claim community debt	relates to a	Other (including a right to offset)		
Date debt was incurred	Opened 8/01/13 Last Active 4/06/16	Last 4 digits of account number	0300	
	e of your form, add	olumn A on this page. Write that number the dollar value totals from all pages.	here: \$72,429.00 \$72,429.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Debtor 1 Bennie S Erickson Piet Name				Document	Page 2	0 of 53	
Debtor 2 Separate Model Name Last Name	=111	in this inforn	nation to identify your o	ase:			
Debtor 2 Separate Model Name Last Name	Deb	tor 1	Bennie S Fricksor	1			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number If the county and the county of the county					Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number C							
Case number Check if this is an amended filing Check if this is an amended filing Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to represent the could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AR: Property (Clinical Form 106A/B) and on obtained by the contracts on Schedule AR: Property (Clinical Form 106A/B) and on obtained by the contracts on Schedule AR: Property (Clinical Form 106A/B) and on obtained by the contracts on Schedule AR: Property (Clinical Form 106A/B) and on obtained by the contracts on Schedule AR: Property (Clinical Form 106A/B) and on obtained the contracts on the second schedule Bright and the second schedule Bright Arithmetic Altan the Continuation Page If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your and access more priority unsecured claims against you? List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. Is a creditor has more than one nonpriority unsecured claims in the alphabetical order of the creditor who holds and the page of Part 2. Yes. Last 4 digits of account number Attn: Correspondence Dept PO Box 15:298 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Contingent Check if this claim is for a community debt in the claim subject to offset? Contingent Contingent Contingent Contingent Contingent Contingent Type of NonPrioRitry unsecured claim: Student loans Co	(Spou	use if, filing)	First Name	Middle Name	Last Name		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NOMPRIORITY claims. List the other party to reaction or contracts or unscripted leases that could result in a claim. Also list executory contracts on Schedule ARI: Property (Official Form 10640) and on chedule 6: Executory Contracts and Unexpired Leases (Official Form 10640). Do not include any creditors with partity secured claims that are listed in orchedule 0: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, need, fill it out	Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NOMPRIORITY claims. List the other party to reaction or contracts or unscripted leases that could result in a claim. Also list executory contracts on Schedule ARI: Property (Official Form 10640) and on chedule 6: Executory Contracts and Unexpired Leases (Official Form 10640). Do not include any creditors with partity secured claims that are listed in orchedule 0: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, need, fill it out	_						
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 as a complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to receive the party and the property (Official Form 106AD) and on chedule of: Executory Contracts and Unseptined Leases (Official Form 106AD). Do not include any creditors with partially secured claims that are listed in executory contracts and unseptined Leases (Official Form 106AD). Do not include any creditors with partially secured claims that are listed in executory contracts and Unseptined Leases (Official Form 106AD). Do not include any creditors with partially secured claims that are listed in executory contracts and unseptined Leases (Official Form 106AD). Do not include any creditors with partially secured claims that are listed in executory contracts and unseptined Leases (Official Form 106AD). Do not include any creditors with partially secured claims that are listed in the case of the claims that are listed in the secured claims that are listed in the case of the claims that are listed in the case of the ca		_					Chock if this is an
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to reventive contracts or unseptive leases that could result in a claim. Also list sevecutory contracts on Schedule AB: Property (Official Form 16969) and on chedule 6: Executory Contracts and Unexpired Leases (Official Form 1696). Do not include any creditors with Partially secured claims Stated in chedule D: Creditors Who Have Claims Scarced by Property. If more space is needed, copy the Party ou need, fill to un, number the entries in the boxes on the fit. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your amen and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim itsed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Chase Card Services Ven. Chase Card Services Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Uniliquidated Debtor 1 and Debtor 2 only Check if this claim is for a community debt List claim subject to offset? Non Debtor 1 for file debtors and another report as priority claims. Check If this claim is for a commu	(·····,					
Schedule E/F: Creditors Who Have Unsecured Claims as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to recently contracts or unsepting classes that could result in a claim. Also list executory contracts on Schedule A/E: Property (Official Form 1066). Do not include any creditors with partially secured claims that are listed in chedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the Hr. Attach the Continuation Page to this page. If you have no information to report in a Part, do not tille that Part. On the top of any additional pages, write your ame and case number (if known). 2011 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.							amonada ming
List All of Your NONPRIORITY Unsecured Claims against you? No. Go to Part 2.	Offi	icial Forn	n 106E/F				
List All of Your NONPRIORITY Unsecured Claims against you? No. Go to Part 2.	Scł	nedule E	/F: Creditors W	ho Have Unsecured	l Claims		12/15
1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. No. Go to Part 2. Yes. No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. Yes. No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Nonpriority Creditor's Name	iche iche eft. A ame	dule G: Execu dule D: Credito Attach the Con and case nun	tory Contracts and Unexpi ors Who Have Claims Secutinuation Page to this page nber (if known).	red Leases (Official Form 106G). Ired by Property. If more space is e. If you have no information to re	Do not include needed, copy	any creditors with partially secured the Part you need, fill it out, number	claims that are listed in the entries in the boxes on the
No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Chase Card Services Nonpriority Creditor's Name Attn: Correspondence Dept PO Box 15298 Willimitgton, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 5 offset? Debtor 5 offset? Debtor 5 offset? Debtor 6 offset? Debtor 6 offset? Debtor 6 offset? Debtor 7 only Debtor 8 offset? Debtor 9 offset 8 offset 8 offset 9 offset 9 offset 8 offset 9 offset 9 offset 9 offset 8 offset 9 of							
Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims against you?		•	• •	I claims against you?			
Part 2: List All of Your NONPRIORITY Unsecured Claims against you?		No. Go to P	art 2.				
3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. Yes.							
No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.	Part	2: List A	II of Your NONPRIORIT	Y Unsecured Claims			
List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Chase Card Services	3. I	Do any credito	ors have nonpriority unsec	ured claims against you?			
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim		☐ No. You hav	ve nothing to report in this pa	art. Submit this form to the court with	h your other sche	edules.	
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim		Vec					
unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim							
Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Chase Card Services Last 4 digits of account number 8085 S7,884.00 Applead 2/01/07 Last Active 4/01/16 As of the date you file, the claim is: Check all that apply Check all that apply Type of NONPRIORITY unsecured claim: Student loans Debtor 2 only Student loans Debtor 3 of the debtors and another Student loans Debtor 4 offset? Debtor 5 offset? Debtor 6 offset? Debtor 9 offset? Debtor 9 offset? Debtor 1 only Student loans Debtor 1 only Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Debtor 2 only Obligations arising plans, and other similar debts	t	unsecured clair than one credit	m, list the creditor separately	for each claim. For each claim liste	d, identify what t	ype of claim it is. Do not list claims alre	ady included in Part 1. If more
Nonpriority Creditor's Name Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debtor 1 onfset Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 of the debtors and another Debtor 7 only Debtor 8 only Debtor 9 of Nonpriority Unsecured Claim: Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 offset? Debtor 6 offset? Debtor 7 only Debtor 8 only Debtor 9 only							Total claim
Nonpriority Creditor's Name Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debtor 1 onfset Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 of the debtors and another Debtor 7 only Debtor 8 only Debtor 9 of Nonpriority Unsecured Claim: Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 offset? Debtor 6 offset? Debtor 7 only Debtor 8 only Debtor 9 only	 4.1	Chase (Card Services	Last 4 digits of ac	count number	8085	\$7.884.00
Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? 4/01/16 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts		0110100					<u> </u>
Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 6 the debtors and another At least one of the debtors and another Check if this claim is for a community debt Student loans Hoo No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts						•	ve
Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply Contingent Disputed Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts				When was the deb	ot incurred?	4/01/16	
Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts				As of the date you	ı file, the claim i	s: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Who incu	rred the debt? Check one.	·		,	
□ Debtor 2 only □ Disputed □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Student loans □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		■ Debtor	1 only	☐ Contingent			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor	2 only				
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_	•	•			
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts					RITY unsecured	d claim:	
debt Is the claim subject to offset? In No Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts							
Is the claim subject to offset? report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts			13 101 a		ing out of a sepa	ration agreement or divorce that you d	id not
····		Is the clai	m subject to offset?			,,,,,	
☐ Yes ☐ Other. Specify Credit Card		■ No		☐ Debts to pensio	n or profit-sharin	g plans, and other similar debts	
		☐ Yes		Other, Specify	Credit Card	[

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Debtor 1 Bennie S Erickson Case number (if know) 4.2 **Chase Card Services** Last 4 digits of account number 3745 \$4,142.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 1/01/06 Last Active Po Box 15298 When was the debt incurred? 4/01/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Chase Card Services** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name When was the debt incurred? Po Box 15153 Wilmington, DE 19886-5153 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice only ☐ Yes 4.4 Citibank Sears 9811 \$4,376.00 Last 4 digits of account number Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Opened 1/01/10 Last Active When was the debt incurred? 4/02/16 Bankrup Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Bennie S Erickson Case number (if know) 4.5 \$0.00 Citibank Sears Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 78051 Phoenix, AZ 85062-8051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify notice only ☐ Yes 4.6 Comenity Bank/WomanWithin Last 4 digits of account number \$1,023.00 8315 Nonpriority Creditor's Name Opened 5/01/14 Last Active P.O. Box 659728 When was the debt incurred? 4/02/16 San Antonio, TX 78265-9728 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.7 Credit One Bank Na Last 4 digits of account number 3010 \$1,578.00 Nonpriority Creditor's Name Opened 11/01/15 Last Active PO Box 98873 When was the debt incurred? 4/04/16 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit Card

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Debtor 1 Bennie S Erickson Case number (if know) 4.8 \$0.00 Credit One Bank Na Last 4 digits of account number 3010 Nonpriority Creditor's Name PO Box 60500 When was the debt incurred? City of Industry, CA 91716-0500 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify notice only ☐ Yes 4.9 Menards / Capital One Last 4 digits of account number 0079 \$4,426.00 Nonpriority Creditor's Name Opened 4/01/15 Last Active 26525 N Riverwoods Blvd When was the debt incurred? 4/02/16 Mettawa, IL 60045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes Menards / Capital One Retail 4.1 \$0.00 0 **Services** Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 71106 When was the debt incurred? Charlotte, NC 28272-1106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify notice only

Document Page 24 of 53 Debtor 1 Bennie S Erickson Case number (if know) 4.1 Mutual of Omaha/gs 9072 \$10,975.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 6/22/14 Last Active 1797 NE Expressway When was the debt incurred? 1/06/16 Atlanta, GA 30329 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Unsecured 4.1 Mutual of Omaha Bank/Greensky 9072 \$10,818.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 6/01/14 Last Active 1797 N East Expy NE When was the debt incurred? 3/07/16 Brookhaven, GA 30329 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Unsecured 4.1 Mutual of Omaha Bank/Greensky \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 933614 When was the debt incurred? Atlanta, GA 31193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

■ Other. Specify notice only

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Entered 05/27/16 14:32:30 Case 16-81307 Doc 1 Filed 05/27/16 Desc Main Document Page 25 of 53 Case number (if know) Debtor 1 Bennie S Erickson 4.1 Premier Bathrooms Inc. 3895 \$1,836.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 2330A S. Nova Rd When was the debt incurred? South Daytona, FL 32119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit purchase ☐ Yes 4.1 Synchrony Bank/Amazon 5824 \$2,028.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 1/01/15 Last Active Po Box 103104 When was the debt incurred? 4/04/16 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 Synchrony Bank/Amazon 5824 \$0.00 6 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Po Box 960013 Orlando, FL 32896-0013 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

Attn: Bankruptcy
Po Box 960013
Orlando, FL 32896-0013
Number Street City State Zlp Code
Who incurred the debt? Check one.

Debtor 1 only
Debtor 2 only
Debtor 1 and Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Check if this claim is for a community debt
Is the claim subject to offset?

Yes
When was the debt incurred?

Men was the debt incurred?

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

Contingent
Unliquidated
Disputed
Type of NONPRIORITY unsecured claim:
Student loans
Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

notice only

Debtor 1 Bennie S Erickson

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Case number (if know)

Synchrony Bank/Care Credit	Last 4 digits of account number	7652	\$2,042.0		
Nonpriority Creditor's Name	_				
Attn: bankruptcy		Opened 10/01/15 Last Active			
Po Box 103104	When was the debt incurred?	4/04/16			
Roswell, GA 30076		OL - L - II II - L - L			
Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	Obligations arising out of a separation agreement or divorce that you did not				
ls the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Charge Acc	count			

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

T. (. 1 O

				-	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	51,128.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	51,128.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		12(12)	<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Bennie S Erickso	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(ii kilowii)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Number Street Street ZIP Code		Person or	r company with Name, Numbe	whom you have the	contract or lease	State what the contract or lease is for
Number Street City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street	2.1					
City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		Name				_
Number Street State ZIP Code		Number	Street			
Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		City		State	ZIP Code	_
Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Number Street Street	2.2					
City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		Name				
2.3 Name Number Street State ZIP Code 2.4 Name Number Street State ZIP Code 2.5 Name Name Street State ZIP Code 2.5 Name Name Street Street State ZIP Code 2.6 Name Street Street		Number	Street			
2.3 Name Number Street State ZIP Code 2.4 Name Number Street State ZIP Code 2.5 Name Name Street State ZIP Code 2.5 Name Name Street Street State ZIP Code 2.6 Name Street Street		City		State	7ID Codo	<u> </u>
Number Street City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street Street Number Street	2.3	City		State	ZIF Code	
City State ZIP Code 2.4 Name Number Street City State ZIP Code 2.5 Name Number Street		Name				_
2.4 Name Number Street State ZIP Code		Number	Street			
2.4 Name Number Street State ZIP Code		City		State	ZIP Code	<u> </u>
Number Street City State ZIP Code 2.5 Name Number Street	2.4					
City State ZIP Code 2.5 Name Number Street		Name				_
2.5 Name Number Street		Number	Street			
2.5 Name Number Street		City		State	ZIP Code	<u> </u>
Number Street	2.5					
		Name				_
		Number	Street			_
City State ZIP Code			Succi			
		City		State	ZIP Code	_

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		DUGUITE	III Paue zo t	<u> 1 33 </u>	
Fill in this inf	formation to identify your				
Debtor 1	Bennie S Erickso	n			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Office Otatoo	Dankiaptoy Court for the.		0		
Case number (if known)				☐ Check if	this is an
				amende	d filing
Official F	Form 106H				
		obtore			40/45
Schedu	le H: Your Cod	eptors			12/15
No Yes 2. Within Arizona, 0 No. Go	California, Idaho, Louisiana, o to line 3. id your spouse, former spou	ı lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live	operty state or territor erto Rico, Texas, Washi with you at the time?	√? (Community property states and territorie	
in line 2	again as a codebtor only i 5D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed the creditor on Sche 6G). Use Schedule D, Schedule E/F, or S	dule D (Official
	umn 1: Your codebtor e, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you Check all schedules that apply:	owe the debt
				_	
3.1 Nan	ne			_ ☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule E/F, line	
Nun	nber Street				
City		State	ZIP Code		
3.2 Nan	ne			Schedule D, line	
				☐ Schedule E/F, line	
Nun	nber Street			, · · · 	
City		State	ZIP Code		

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Fill	in this information to identify your o	ase.				l			
	otor 1 Bennie S Er								
	otor 2 use, if filing)								
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
(If kr	se number Se number Se number Missing Form 1061		-			Check if this is An amend A supplem 13 income	ed filing ent showin	ng postpetition ollowing date:	
	fficial Form 106l chedule I: Your Inc					MM / DD/	YYYY		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing w	ng jointly, and your ith you, do not inclu	spouse i	is liv matic	ing with you, inc on about your sp	lude inforr ouse. If m	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed			☐ Emp	loyed employed		
	employers. Include part-time, seasonal, or self-employed work.	Occupation Employer's name	retired						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mo	nthly Income							
spou	mate monthly income as of the duse unless you are separated.				•		•	·	
•	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	on for all e	emplo	oyers for that pers	on on the li	ines below. If y	you need
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly over	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Deb	tor 1	Bennie S Erickson	_	Case	number (if known)			
				For	r Debtor 1	non-f	ebtor 2 or lling spouse	
	Сор	y line 4 here	4.	\$_	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$_	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$-	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		Ψ_	0.00	<u> </u>	IVA	
		settlement, and property settlement.	8c.	\$_	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$_	1,543.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
		Deceased husband's VA death			4.054.00		N1/A	
	8h.	Other monthly income. Specify: benefit	8h.+			+ \$	N/A	
		Deceased husband's retirement	_	\$_	505.00	\$	N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,302.00	\$	N/A	
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		3,302.00 + \$		N/A = \$	3,302.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			-			-,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not cify:	depen			•	hedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes					12. \$ Combin	3,302.00
13.	Do y	vou expect an increase or decrease within the year after you file this form No. Yes. Explain:	1?				monthly	

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	in this i nforms	tion to identify	ur ogga					
		tion to identify yo	our case:					
Deb	otor 1	Bennie S Eri	ckson				eck if this is:	~
Deb	otor 2							y owing postpetition chapter
(Spo	ouse, if filing)					_	13 expenses as	of the following date:
Unit	ed States Bankr	uptcy Court for the:	NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)							
O	fficial Fo	rm 106J				-		
		J: Your I	Exper	ises				12/1
Be info	as complete a ormation. If m mber (if know	and accurate as	possible eded, atta y questio	. If two married people ar ich another sheet to this				
1.	Is this a joir		IIOIU					
	■ No. Go to	line 2. s Debtor 2 live i	in a senar	ate household?				
	□ 103. D00		ii a sepai	ate nousenoia:				
			t file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?		. ,	•			
۷.	•	•	☐ No					
	Do not list Do Debtor 2.	eptor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Developer	di-						□ No
	Do not state dependents				Disabled Daug	ghter	Adult	■ Yes
	·							_ □ No
					Grandson		minor	■ Yes
								□ No
								_ Yes
								□ No
_	Da							_ Pes
3.		enses include f people other th	han	No				
		d your depender		Yes				
Der	4 O. Fatim	-t- V O		h. F				
Est exp	imate your ex		our bankr	uptcy filing date unless y				hapter 13 case to report of the form and fill in the
the		n assistance and		government assistance i cluded it on <i>Schedule I:</i> \			Your ex	penses
, 5.	10	- - /						
4.		r home owners and any rent for the		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	545.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.	· · · · · · · · · · · · · · · · · · ·	0.00
				upkeep expenses		4c.	·	150.00
5		owner's associati		dominium dues our residence, such as ho	mo oquity loops	4d. 5.	·	0.00
5.	Auditiolidi	nonuaue paviile	JIIIO IUI V	zar residence, such as no	me equity loans	ິນ.	w	U UU

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Depto	Bennie S Erickson	Jase num	ber (if known)	
6.	Jtilities:			
-	Sa. Electricity, heat, natural gas	6a.	\$	250.00
	Sb. Water, sewer, garbage collection	6b.	·	20.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		475.00
	6d. Other. Specify: Culligan	6d.	•	75.00
	Food and housekeeping supplies	— 7.	\$	600.00
	Childcare and children's education costs	8.	\$	0.00
		9.	·	
	Clothing, laundry, and dry cleaning Personal care products and services	9. 10.		100.00
	·		·	50.00
	Medical and dental expenses	11.	>	20.00
	Fransportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	250.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	·	80.00
	Charitable contributions and religious donations	14.		0.00
	nsurance.	14.	Ψ	0.00
	Oo not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	40.00
	15b. Health insurance	15b.		0.00
	15c. Vehicle insurance	15c.	·	78.00
	15d. Other insurance. Specify:	15d.	·	
	Faxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	13u.	Ψ	0.00
	Specify:	16.	2	0.00
	nstallment or lease payments:	10.	Ψ	0.00
	17a. Car payments for Vehicle 1	17a.	\$	425.00
	17b. Car payments for Vehicle 2	17b.	· -	0.00
	176. Other. Specify:	176.	·	
	17d. Other Specify:		*	0.00
	• • •	17d.	Ф	0.00
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
	Other real property expenses not included in lines 4 or 5 of this form or on <i>Sched</i>		our Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.	· ·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20d. 20e.	·	
			·	0.00
1.	Other: Specify:	21.	+\$	0.00
2.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	3,158.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2 159 00
	.20. Add into 22d drid 22b. The result to your monthly expenses.			3,158.00
3.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,302.00
:	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	3,158.00
	•			
	23c. Subtract your monthly expenses from your monthly income.			444.00
	The result is your monthly net income.	23c.	\$	144.00
	Do you expect an increase or decrease in your expenses within the year after you			
	For example, do you expect to finish paying for your car loan within the year or do you expect your n nodification to the terms of your mortgage?	nortgage	payment to increase	or decrease because of
	No.			
	Tyes Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Bennie S Erickso	on			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For		on Individual	Dobtorio Co	boduloo	
Declara	tion About a	<u>an Individual</u>	Deptor's 3c	neaules	12/15
You must file th obtaining mone years, or both. 1	is form whenever you f	n connection with a bank	s or amended schedules.	. Making a false stater	ment, concealing property, or), or imprisonment for up to 20
Did you pa	ay or agree to pay some	eone who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
that they ar	alty of perjury, I declare re true and correct. nnie S Erickson e S Erickson	that I have read the sum	mary and schedules filed X Signature of	d with this declaration	,
	ire of Debtor 1		Signature of	DODIOI Z	

Date _____

Date May 27, 2016

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Fill	in this infor	mation to identify you	ur case:			
Deb	otor 1	Bennie S Ericks	son			
		First Name	Middle Name	Last Name		
l	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ba	inkruptcy Court for the	: NORTHERN DISTRICT	OF ILLINOIS		
Cas (if kn	se number _ own)					☐ Check if this is an amended filing
Sta Be a infor	s complete rmation. If n	of Financial and accurate as possione space is needed		are filing together, bo	oth are equally responsi	
	<u> </u>	n). Answer every que		u Lived Refere		
			larital Status and Where Yo	u Livea Before		
1.	What is you	r current marital stat	tus?			
	■ Married Not ma					
2.	During the l	ast 3 years, have you	u lived anywhere other than	where you live now?		
	■ No					
	_	st all of the places you	lived in the last 3 years. Do r	not include where you li	ve now.	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 P	rior Address:	Dates Debtor 2 lived there
			ever live with a spouse or le alifornia, Idaho, Louisiana, No			or territory? (Community property
	■ No □ Yes. Ma	ake sure you fill out So	chedule H: Your Codebtors (C	Official Form 106H).		
Par	t 2 Expla	in the Sources of Yo	ur Income			
4.	Fill in the tot	al amount of income y	employment or from operation ou received from all jobs and unhave income that you received	all businesses, including	ng part-time activities.	vious calendar years?
	_	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions exclusions)	Sources of inc and Check all that a	

Debtor 1 Bennie S Erickson

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Case number (if known)

Did you receive any other income during this year or the two previous calendar y
--

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

Ш	N	0
---	---	---

Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Deceased Husband's VA benefits	\$6,270.00		
	Social Security	\$8,245.00		
	Deceased Husband's pension	\$2,525.00		
For last calendar year: (January 1 to December 31, 2015)	Deceased Husband's VA benefits	\$15,048.00		
	Social Security	\$17,000.00		
	Deceased Husband's pension	\$6,060.00		
For the calendar year before that: (January 1 to December 31, 2014)	Deceased Husband's VA benefits	\$15,048.00		
	Social Security	\$6,552.00		
	Deceased Husband's pension	\$6,060.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are either De	btor 1's or	Debtor 2's	debts pri	imarily cons	sumer debts
----	---------------	-------------	------------	-----------	--------------	-------------

□ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☐ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

■ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

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Debtor 1 Bennie S Erickson

	Creditor's Name and Address	Dates of payment	Total amount paid \$1,635.00	Amount you still owe	Was this payment for ■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other							
	Chase	March, April, May 2016		\$63,000.00								
	Members Alliance Credit Union	March, April, May 2016	\$1,275.00	\$9,400.00	☐ Mortgage ☐ Car ☐ Credit Car ☐ Loan Re ☐ Suppliers ☐ Other	ard payment s or vendors						
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment						
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment						
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures	P ***									
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.											
	Case title Case number	Nature of the case	Court or agency		Status of the case							
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.											
	Yes. Fill in the information below.	Describe the Burne		D. 1		Webs at the						
	Creditor Name and Address	Describe the Property		Date		Value of the property						
		Explain what happened				property						

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11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.				
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount	
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an ■ No □ Yes	y, was any of your property in the possession of an a other official?	assignee for the bene	fit of creditors, a	
Par					
13.	■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	han \$600 per person?	•	
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value	
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.				
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value	
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrupto or gambling?	y or since you filed for bankruptcy, did you lose any	thing because of theft	, fire, other disaster,	
	■ No □ Yes. Fill in the details.				
	how the loss occurred Inc	scribe any insurance coverage for the loss lude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost	
Par	List Certain Payments or Transfers				
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.				ty to anyone you	
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment	
	Dennis L Leahy One Court Place Suite 203 Rockford, IL 61101 attyleahy@yahoo.com	Attorney Fees	2016	\$1,000.00	

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Debtor 1 **Bennie S Erickson**

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.					
	Person Who Was Paid Address	Description and vertransferred	alue of any propert	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your kinclude both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial affa nade as security (such as the	irs? he granting of a secu			
	Person Who Received Transfer Address	Description and v property transferr		Describe any property or payments received or debter paid in exchange	Date transfer was made	
19.	Person's relationship to you Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		y property to a self	-settled trust or similar devi	ice of which you are a	
	Name of trust	Description and value of the property transferred Date Transfer was made				
	B: List of Certain Financial Accounts, In Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assout No	cy, were any financial acc or other financial accour ociations, and other finan	counts or instrume its; certificates of c cial institutions.	nts held in your name, or fo	edit unions, brokerage	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	year before you filed for Who else had acc Address (Number, St	ess to it? Des	afe deposit box or other dep	Do you still have it?	
22.	Have you stored property in a storage unit No Yes. Fill in the details.	·	home within 1 year	r before you filed for bankru	uptcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		scribe the contents	Do you still have it?	

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Debtor 1 **Bennie S Erickson**

Pa	rt 9: Identify Property You Hold or Control for S	omeone Else				
23.	3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Pa	rt 10: Give Details About Environmental Informat	tion				
For	the purpose of Part 10, the following definitions a	pply:				
	Environmental law means any federal, state, or lotoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	, land, soil, surface water, ground				
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	-	law, whether you now own, operate, o	or utilize it or used		
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si		s waste, hazardous substance, toxic s	substance,		
Rep	port all notices, releases, and proceedings that you	u know about, regardless of wher	n they occurred.			
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?		
	■ No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any r	elease of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site	Governmental unit	Environmental law, if you	Date of notice		
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		Date of House		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					
	No					
	Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Pa	rt 11: Give Details About Your Business or Conn	ections to Any Business				
			of the fellowing competions to on			
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or €	equity securities of a corporation				

Case 16-81307 Doc 1 Filed 05/27/16 Entered 05/27/16 14:32:30 Page 40 of 53 Case number (if known) Document Debtor 1 Bennie S Erickson No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Bennie S Erickson Signature of Debtor 2 **Bennie S Erickson** Signature of Debtor 1 Date May 27, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Official Form 107

☐ Yes. Name of Person

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Fill in this infor	mation to identify your case:		
Debtor 1	Bennie S Erickson		_
Debtor 2	First Name Middle	Name Last Name	
(Spouse if, filing)	First Name Middle	Name Last Name	_
United States Ba	ankruptcy Court for the: NORTHER	RN DISTRICT OF ILLINOIS	
Case number			
(if known)		_	☐ Check if this is an amended filing
Official Fo		ndividuals Filing Under Cha	apter 7 12/15
	lividual filing under chapter 7, you i		
_	ve claims secured by your property		
You must file th	ever is earlier, unless the court exte	e has not expired. /s after you file your bankruptcy petition or by the d ends the time for cause. You must also send copies	
	eople are filing together in a joint c nd date the form.	ase, both are equally responsible for supplying cor	rect information. Both debtors must
	and accurate as possible. If more s your name and case number (if kno	space is needed, attach a separate sheet to this formum).	n. On the top of any additional pages,
Part 1: List Y	our Creditors Who Have Secured C	Claims	
For any credition information b	-	edule D: Creditors Who Have Claims Secured by Pr	operty (Official Form 106D), fill in the
	reditor and the property that is collate	What do you intend to do with the proper secures a debt?	by that Did you claim the property as exempt on Schedule C?
Creditor's (Chase Mtg	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	=
Description of	f mortgage against residence	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt	:	Retain the property and [explain]:	
Creditor's	Members Alliance Credit Union	☐ Surrender the property.	□No
name:		Retain the property and redeem it.	=
Description of	f 2011 Puick LaCorna	Retain the property and enter into a	Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Description of 2011 Buick LaSerne

Will the lease be assumed?

property

securing debt:

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Debtor 1 Bennie S I	Erickson	Case number (if known)
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Part 3: Sign Below Under penalty of perjui	ry, I declare that I have indicated my intention about any prop	perty of my estate that secures a debt and any personal
	t to an unexpired lease.	
X /s/ Bennie S Eri Bennie S Ericks Signature of Debto	Signature Signature	e of Debtor 2
Date May 27	7, 2016 Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81307 Doc 1 Filed 05/27/16 Entered 05/27/16 14:32:30 Desc Main Document Page 47 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Bennie S Erickson		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPI	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy.	or agreed to be pa	d to me, for services rer	ndered or to
	For legal services, I have agreed to accept		\$	1,000.00	
	Prior to the filing of this statement I have received	d	\$	1,000.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed con	npensation with any other person	unless they are me	mbers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the manner.				w firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	ts of the bankruptcy	case, including:	
	a. Analysis of the debtor's financial situation, and renb. Preparation and filing of any petition, schedules, stc. Representation of the debtor at the meeting of credd. [Other provisions as needed]	atement of affairs and plan which	may be required;	-	uptcy;
	Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h	ions as needed; preparation			
5.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any cany other adversary proceeding.			ces, relief from stay	actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of a pankruptcy proceeding.	any agreement or arrangement for	payment to me for	representation of the de	ebtor(s) in
N	/lay 27, 2016	/s/ Dennis L Leat	ny		
I	Date	Dennis L Leahy Signature of Attorne			
		Dennis L Leahy	•		
		One Court Place Rockford, IL 6110			
		815 964-9600 Fa			
		attyleahy@yahoo	o.com		
		Name of law firm			

DENNIS L. LEAHY Attorney at Law One Court Place, Suite 203 Rockford, IL 61101 815/964-9600

CONTRACT FOR CHAPTER 7 BANKRUPTCY

This agreement is executed this Hay of				
Type of Bankruptcy: Client retains Attorney Dennis L. Leahy to file a Chapter 7 Bankruptcy.				
Services Provided by Attorney: Contingent upon being paid for the services as specified below, the attorney shall provide the following legal services for the client: Preparation and filing of Chapter 7 Petition in Bankruptcy.				
Fees: The base fee for the filing of the bankruptcy is $\frac{1}{3}$, plus the filing fee of $\frac{335.00}{335.00}$, and plus the credit report fee of $\frac{1}{3}$, for a total of $\frac{1}{3}$, to be paid prior to filing. The amount of the filing fee may increase as determined by Congress.				
Additional costs required on a case-by-case basis include: (1) Mandatory prepetition credit counseling and post-petition financial education; (2) Asset verification report (when required by attorney).				
If the fees are not paid as stated above and as a result the amount of legal service to be provided by the attorney is increased, the fee shall be increased accordingly to compensate the attorney for the additional time and expense in providing the legal services.				
Terms of Payment: 1. The fees shall be paid in full prior to the filing of the bankruptcy. 2. Client has paid \$ as a retainer fee. This amount has been earned upon receipt by the attorney and is non-refundable. 3. No earned portion of any fee is refundable.				

Services Not provided Under the Base Fee:

Representation does not include defense of discharge or dischargeability proceedings, redemption proceedings, dismissal proceedings, reinstatement proceedings, judicial lien avoidances, post-petition amendments, relief from stay actions or other adversary proceedings or attendance at continued meeting of creditors, preparation of motion to approve reaffirmation agreements.

Compensation for Services Not Covered Under Base Fee:

- 1. Fees for additional services shall be paid at \$250.00 per hour plus costs, when applicable.
- 2. \$75.00 for preparation and filing of each amendment to the bankruptcy.
- 3. \$75.00 for preparation and filing of motion for court approval of reaffirmation agreement and attendance at hearing if required by the court.
- 4. \$500.00 plus filing fee for motion to reopen bankruptcy.

Client understands that if the client does not pay the fees as set forth above, the attorney has no obligation to provide the services.

Client Obligations:

- 1. To pay the fees as set forth above.
- 2. To provide accurately, honestly and in a timely manner, all of the information including all documents necessary to prepare and file the bankruptcy.
- 3. To satisfy prepetition credit counseling and post-petition financial education requirements.
- 4. To keep the attorney advised of the client's address and telephone number.
- 5. To attend the 341 Meeting of Creditors and other hearings set in the case as advised by the attorney.
- 6. To provide any information requested of the client by the Bankruptcy Trustee, the US Trustee, or any other party in interest, unless the court rules that the client is not required to provide the information.
- 7. To respond immediately to any request of the client by the attorney or the attorney's staff.
- 8. Attorney is authorized to disburse from his Client Trust Account, when applicable, funds for payment of filing fees, costs, attorney fees and refunds.

Termination: Client may terminate this representation at any time with or without cause by notifying attorney in writing of client's desire to do so. Upon receipt of the notice to terminate representation, attorney will cease all legal work on client's behalf immediately. Client will be responsible for paying all legal fees, expenses and disbursements incurred on client's behalf in this matter until written notice of termination is received by attorney.

If client terminates the representation before the conclusion of the matter, attorney will be entitled to receive a reasonable fee for the work attorney has performed based upon the amount of time required, the complexity of the matter, the time frame within which the work was performed, the responsibility involved, as well as attorney's experience, ability, reputation, and the results obtained. This fee is in addition to any legal fees, expenses and disbursements incurred on client's behalf that has not previously been paid by client.

To the extent permitted by rules of professional responsibility and the court, attorney may terminate his representation at any time if client breaches any material term of this agreement, fails to cooperate or follow attorney's advice on a material matter, if a conflict of interest develops or is discovered, or if there exists, at any time, any fact or circumstance that would, in attorney's opinion, render attorney's continuing representation unlawful, unethical, or otherwise inappropriate.

If attorney elects to terminate representation, client will timely take all steps reasonably necessary and will cooperate as reasonably required to relieve attorney of any further obligation to perform legal services, including the execution of any documents necessary to complete attorney's withdrawal from representation. In such case, client agrees to pay for all legal services performed and any legal fees, expenses or disbursements incurred on client's behalf before the termination of representation in accordance with the provisions of this agreement.

File Retention and Destruction:

At the conclusion of this matter, attorney will retain the bankruptcy file for a period of __ attorney closes his file. At the expiration of the _____-year period, attorney will destroy this file unless client notifies attorney in writing that client wishes to take possession of the file. Attorney reserves the right to charge administrative fees and costs associated with researching, retrieving, copying and delivering such files.

Client acknowledges receipt of a copy of this agreement.

Dennis L. Leahy

Client

Client

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code.

United States Bankruptcy Court Northern District of Illinois

In re	Bennie S Erickson		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	19
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and	correct to the best of my
Date:	May 27, 2016	/s/ Bennie S Erickson Bennie S Erickson Signature of Debtor		

Chase Card Services Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Card Services Po Box 15153 Wilmington, DE 19886-5153

Chase Mtg P.O. Box 24696 Columbus, OH 43224

Citibank Sears Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Citibank Sears Po Box 78051 Phoenix, AZ 85062-8051

Comenity Bank/WomanWithin P.O. Box 659728 San Antonio, TX 78265-9728

Credit One Bank Na PO Box 98873 Las Vegas, NV 89193

Credit One Bank Na PO Box 60500 City of Industry, CA 91716-0500

Members Alliance Credit Union 2550 S Alpine Rd Rockford, IL 61108

Menards / Capital One 26525 N Riverwoods Blvd Mettawa, IL 60045

Menards / Capital One Retail Services P.O. Box 71106 Charlotte, NC 28272-1106

Mutual of Omaha/gs 1797 NE Expressway Atlanta, GA 30329

Mutual of Omaha Bank/Greensky 1797 N East Expy NE Brookhaven, GA 30329

Mutual of Omaha Bank/Greensky P.O. Box 933614 Atlanta, GA 31193

Premier Bathrooms Inc. 2330A S. Nova Rd South Daytona, FL 32119

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 960013 Orlando, FL 32896-0013

Synchrony Bank/Care Credit Attn: bankruptcy Po Box 103104 Roswell, GA 30076